	Fill in this information to iden	ify the case:		
V p V u college pod p p d mark was debraved	United States Bankruptcy Court  EASTEAN District  Case number (If known):	1		☐ Check if this is ar
$\overline{C}$	official Form 205			amended filing
		tition Against a No	n-Individua	12/15
a c	ase against an individual, use	tcy case against a non-individual you allege the <i>Involuntary Petition Against an Individu</i> y additional sheets to this form. On the top	<i>ıal</i> (Official Form 105). Be	as complete and accurate as possible. If
Pa	it 1: Identify the Chapte	r of the Bankruptcy Code Under Which	Petition Is Filed	
1.	Chapter of the Bankruptcy Code	Check one:  Chapter 7  Chapter 11		
Pa	ort 2: Identify the Debtor			
2.	Debtor's name	KOREAN RADIO B	RUADCASTIN	6, INC.
3.	Other names you know the debtor has used in the last 8 years Include any assumed			
	names, trade names, or doing business as names.			
4.	Debtor's federal Employer Identification Number (EIN)	Unknown 20 - 0 6 6 5 5 4 3		
5.	Debtor's address	Principal place of business		ddress, if different
		136-56 39 AVENUE	S Number	Street
			P.O. Box	
		City State	ZIP Code City	State ZIP Code
				of principal assets, if different from place of business
		© ∪ ← ℓ ル ∫ County	Number	Street
			City	State ZIP Code

Debtor KONFAN KAJIO SROAD CASTING, INC. Case number (of known)							
6.	Debtor's website (URL)	N/A					
7.	Type of debtor	Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))  Partnership (excluding LLP)  Other type of debtor. Specify:					
8.	Type of debtor's business	Check one:					
		☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))					
		☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))					
		Railroad (as defined in 11 U.S.C. § 101(44))					
		☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))					
		☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))					
		☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))					
		None of the types of business listed.					
		☐ Unknown type of business.					
<b>Q</b>	To the best of your	€ No					
٠.	knowledge, are any						
	bankruptcy cases						
	pending by or against any partner or affiliate of this debtor?	District Date filed Case number, if known					
	•	DebtorRelationship	_				
		District Date filed Case number, if known					
		MM / DD / YYYY					
Pa	art S: Report About the	· Case					
10.	Venue	Check one:					
		Over the last 180 days before the filing of this bankruptcy, the debtor had a domicile, principal place of business, or principal assets in this district longer than in any other district.					
		A bankruptcy case concerning debtor's affiliates, general partner, or partnership is pending in this district.					
11.	Allegations	Each petitioner is eligible to file this petition under 11 U.S.C. § 303(b).					
	•	The debtor may be the subject of an involuntary case under 11 U.S.C. § 303(a).					
		At least one box must be checked:					
		The debtor is generally not paying its debts as they become due, unless they are the subject of a bona fide dispute as to liability or amount.					
	·	Within 120 days before the filing of this petition, a custodian, other than a trustee, receiver, or an agent appointed or authorized to take charge of less than substantially all of the property of the debtor for the purpose of enforcing a lien against such property, was appointed or took possession.					
12	. Has there been a	₩No	-particular				
	transfer of any claim	Yes. Attach all documents that evidence the transfer and any statements required under Bankruptcy					
	against the debtor by or to any petitioner?	Rule 1003(a).					

Name	RADIO GROAD CASTING, INC.	Case number (#known)	
Each petitioner's claim	Name of petitioner	Nature of petitioner's claim	Amount of the claim above the value of any lien
	MULTICULTURAL RATIO	ORDER EUR TUBEME	ENT 5 1,061,374"05
	BROAD CASTING, INC.		\$
			_ \$
		Total of petitioners' claims	\$ 1,061,374.01
the top of each sheet. Folloadditional petitioning cred statement under penalty o	list petitioners, attach additional sheets. Write the owing the format of this form, set out the information, the petitioner's claim, the petitioner's represent perjury set out in Part 4 of the form, followed by each the petitioner's attorney.	on required in Parts 3 and 4 of the for ntative, and the petitioner's attorney.	m for each Include the
t 4: Request for Reli			
<b>WARNING</b> Bankruptcy fra \$500,000 or imprisonment fo	ud is a serious crime. Making a false statement in con r up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15	nection with a bankruptcy case can resu 9, and 3571.	It in fines up to
foreign representative appoi	oration, attach the corporate ownership statement requinted in a foreign proceeding, attach a certified copy of tion in this document and have a reasonable belief that Representative Attor	he order of the court granting recognition	oetitioner is a n.
Name and mailing address	of potitioner		
		TO COAC TO COAL STE	
	RADIO BROADCHSTING, INC. Printe	OUGLAS J. PICK, ES &	
Name 40 EXCHANGE	RADIO BROADCHSTING, INC. Printe	ouglas J. Pick, 858 d name ck 4 Z481CK1 L name, if any	
Name <b>4</b> o <i>EXCHAN 68</i> Number Street	PLACE SUITE 1010  PINTE  NY 10005	CK 4 ZABICKI L name, if any 69 LEXINGTON AUG	<u> </u>
Name  40 EXCHANGE  Number Street  NEW YORK  City	PLACE SUITE 1010  Printe  PLACE SUITE 1010  Firm  NY 10005  State  ZIP Code	CK 4 ZABICKI L name, if any 69 LEXINGTON AUG	<u> </u>
Name  40 EXCHANGE  Number Street  NEW YORK  City	PLACE SUITE 1010  PINTE  PLACE SUITE 1010  Firm F  State  ZIP Code  City	CK 4 ZABICKI L lame, if any  69 LEXINGTON AUG  er Street  EW YORK  N  State	10017 ZIP Code
Name  Ho EXCHANGE  Number Street  NEW YORK  City  Name and mailing address	PLACE SUITE 1010  PINTE  PLACE SUITE 1010  Firm F  State  ZIP Code  City	CLL 4 ZABICKI L name, if any  LG9 LEXINGTON AUG  The Street  The York N  State  ct phone(212)695-60@mail 7	10017 ZIP Code
Name  Yo EXCHANGE  Number Street  NEW YORK  City  Name and mailing address  Name	PLACE SUITE 1010  PLACE SUITE 1010  Pinte  PLACE SUITE 1010  Firm F  State  ZIP Code  City  Conta	CK 4 ZABICKI L lame, if any  69 LEXINGTON AUG  er Street  EW YORK  N  State	10017 ZIP Code
Name  Yo EXCHANGE  Number Street  NEW YORK  City  Name and mailing address  Name	PLA-LE SUITE 1010  Pla-LE SUITE 1010  Pimm r  State ZIP Code  Of petitioner's representative, if any  Conta	CLL 4 ZABICKI L name, if any  LG9 LEXINGTON AUG  The Street  The York N  State  ct phone(212)695-60@mail 7	10017 ZIP Code
Name  Yo EXCHANGE  Number Street  Otty  Name and mailing address  Name  Number Street	PLACE SUITE IOLO  Printe  PLACE SUITE IOLO  Firm r  State  ZIP Code  City  Conta  Bar n  State  State  ZIP Code	ck 4 Z461CK1 L lame, if any  C9 LFX1NGTON AUG er Street  EW YOUK  State  ct phone(212)695-60@mail 7	10017 ZIP Code
Name  40 EXCHANGE  Number Street  New York  City  Name and mailing address  Name  Number Street	PLA-LE SUITE IOLO  Pinte  PLA-LE SUITE IOLO  Firm r  State  State  ZIP Code  City  Conta  Bar n  State  State  ZIP Code	ck 4 Z461CK1 L lame, if any  C9 LFX1NGTON AUG er Street  EW YOUK  State  ct phone(212)695-60@mail 7	10017 ZIP Code
Name  Ho EXCHANGE  Number Street  New York  City  Name and mailing address  Name  Number Street	PLACE SUITE 1010  PLACE SUITE 1010  State ZIP Code  State ZIP Code  State ZIP Code  Parinte  State ZIP Code  Printe  State ZIP Code  Printe  P	CLL 4 ZABICKI Lame, if any  C9 LEXINGTON AUG  EW YORK  State  Ct phone(212)695-60@mail 3  umber 1743996	10017 ZIP Code
Name  Ho EXCHANGE  Number Street  NEW YORK  City  Name and mailing address  Name  City  I declare under penalty of particular and penalty of particu	PLACE SUITE 1010  PLACE SUITE 1010  State ZIP Code  State ZIP Code  State ZIP Code  Parinte  State ZIP Code  Printe  State ZIP Code  Printe  P	ck 4 Z461CK1 L lame, if any  C9 LFX1NGTON AUG er Street  EW YOUK  State  ct phone(212)695-60@mail 7	10017 ZIP Code